House hold expenditure on health care

69. SHRI N.K. SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that according to a new analysis of health spending, Indians are spending over six per cent of their monthly house hold expenditure on health care and 70 per cent of this goes for buying medicines;

(b) whether per capita monthly expenditure on health-care has also gone up in rural as well as urban areas in the recent years;

(c) whether it is also a fact that the total expenditure on drugs is higher than the total retail market value of drugs sold by all pharmaceutical companies in the country; and

(d) the steps taken by Government to analyze the trends in health care spending and contain the price rise of drugs?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) Expenditure on 'Medical' as percent of total consumer expenditure during 2004-05 and 2005-06 is given in the Table below:

	2004-05		2005-06	
	Rural	Urban	Rural	Urban
Expenditure on 'Medical' as % of total consumer expen.	7%	5%	7%	6%

SOURCE: NSS Reports

Percentage share of 'medicine (non-institutional)' in the total expenditure on 'Medical' during 2004-05 formed 64% in Rural and 56% in Urban area.

(c) Information on total expenditure on drugs and retail market value of drugs sold by all pharmaceutical companies in the country, is not maintained.

(d) Consumer Expenditure (MPCE) surveys are conducted at regular intervals to analyze pattern of spending across various items of consumption including health care.

The following steps have been taken to control the price rise of drugs:

- Effective implementation of the Drugs (Price Control) Order, 1995 in respect of scheduled and non-scheduled drug / formulations
- Examination / regular monitoring of the movement of prices and also fix retail prices of non-scheduled drug / formulations, if necessary, in the interest of public.
- Revision of allowable price increase limit to 10% from 20% *w.e.f.* 1.4.2007 in respect of non-scheduled drugs.
- Creation of a separate enforcement division to keep a check on the price rise.

CGHS facility to MP staff

70. SHRI TARIQ ANWAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that CGHS facility is provided to all the Government servants in the country including the Members of Parliament;

(b) if so, whether there is any provision for providing this facility to staff of MPs who are drawing salaries from Parliament Secretariat; and

(c) if not, what are the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) Only Central Government Employees and pensioners drawing their salary and pension from civil estimates, Members of Parliament, Ex-MPs, ex-governors, freedom fighters etc., are eligible for CGHS facilities.

(b) No, Sir.

(c) Since they are not Central Government Employees/Pensioners drawing salary/pension from civil estimates they are not eligible for CGHS facility.

Medical facilities to Government employees

71. SHRI SABIR ALI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the medical facilities provided to retired/serving Government employees in Government and private hospitals;

(b) whether in emergency can they go to any hospital;

(c) whether that hospital can refuse treatment and whether any such case has come to notice; and

(d) if so, the action taken in the matter?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) OPD and IPD facilities are extended to Central Government employees who are CGHS beneficiaries both in Government and private hospitals empanelled with the CGHS. In the case of Serving Govt employees not covered by CGHS, the provisions of CS(MA) Rules, 1944 apply. Retired officials not covered by CGHS are not covered by CS(MA) Rules 1944. Pensioners who are staying in non-CGHS areas can get CGHS cards made in their names after making the appropriate contribution for IPD facilities. In addition they are entitled to an amount of Rs.100/- (Rupees one hundred only) as Fixed Medical Allowance for day to day OPD expenses. Beneficiaries under CS(MA) Rules, 1944, can avail, on the advice of the Authorised Medical Attendant treatment in private hospitals after getting approval from the Organisation in which they are working.

(b) CS(MA) Rules/CGHS beneficiary can go to any hospital under emergent conditions.

(c) and (d) In accordance with the provisions of the Memorandum of Agreement signed by each of the private hospital with the CGHS at the time of its empanelment, they are liable to action leading even to cancellation of their empanelment with the CGHS for violation of any of the term of the agreement.